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110TH CONGRESS  
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# H. R. 2199

[Report No. 110–166]

To amend title 38, United States Code, to direct the Secretary of Veterans Affairs to provide certain improvements in the treatment of individuals with traumatic brain injuries, and for other purposes.

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## IN THE HOUSE OF REPRESENTATIVES

MAY 8, 2007

Mr. MICHAUD introduced the following bill; which was referred to the  
Committee on Veterans' Affairs

MAY 23, 2007

Additional sponsors: Mr. MILLER of Florida, Mr. HARE, Ms. CORRINE BROWN of Florida, Ms. BERKLEY, Mr. ALTMIRE, Mr. WALSH of New York, Mr. HINCHEY, Mr. PATRICK MURPHY of Pennsylvania, Mr. WELCH of Vermont, Ms. SHEA-PORTER, Mr. MCGOVERN, Ms. EDDIE BERNICE JOHNSON of Texas, Mr. HOLT, Mr. HODES, Mr. MATHESON, Mr. PERLMUTTER, Mr. BRALEY of Iowa, Mr. WALZ of Minnesota, Mr. ELLISON, Mr. TAYLOR, Mr. MELANCON, Mr. BOREN, Mr. POMEROY, Mr. BOSWELL, Mr. DONNELLY, Mr. BILIRAKIS, Mr. McDERMOTT, Mr. ENGEL, Mr. ALLEN, Mr. SOUDER, Mrs. BOYDA of Kansas, Mr. OBERSTAR, Mr. BLUMENAUER, Mr. CUMMINGS, Mr. TIM MURPHY of Pennsylvania, and Mr. SPRATT

MAY 23, 2007

Reported with amendments, committed to the Committee of the Whole House  
on the State of the Union, and ordered to be printed

[Omit the part struck through and insert the part printed in *italic*]

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# A BILL

To amend title 38, United States Code, to direct the Secretary of Veterans Affairs to provide certain improvements in the treatment of individuals with traumatic brain injuries, and for other purposes.

1       *Be it enacted by the Senate and House of Representa-*  
 2       *tives of the United States of America in Congress assembled,*

3       **SECTION 1. SHORT TITLE.**

4       This Act may be cited as the “Traumatic Brain In-

5       jury Health Enhancement and Long-Term Support Act of

6       2007”.

7       **SEC. 2. SCREENING, REHABILITATION, AND TREATMENT**

8                       **FOR TRAUMATIC BRAIN INJURY.**

9       (a) SCREENING, REHABILITATION, AND TREATMENT

10       FOR TRAUMATIC BRAIN INJURY.—

11               (1) IN GENERAL.—Chapter 17 of title 38,

12       United States Code, is amended by adding at the

13       end the following new subchapter:

14       “SUBCHAPTER IX—TRAUMATIC BRAIN INJURY

15       “§ 1791. **Screening for traumatic brain injuries**

16       “(a) SCREENING PROGRAM.—The Secretary shall es-

17       tablish a program to screen veterans who are eligible for

18       hospital care, medical services, and nursing home care

1 under section 1710(e)(1)(D) of this title for symptoms of  
2 traumatic brain injury.

3 “(b) REPORT.—Not later than one year after the  
4 date of the enactment of this section, and annually there-  
5 after, the Secretary shall submit to the Committees on  
6 Veterans’ Affairs of the Senate and the House of Rep-  
7 resentatives a report containing the following information:

8 “(1) The number of veterans screened under  
9 the program during the year preceding such report.

10 “(2) The prevalence of traumatic brain injury  
11 symptoms among the veterans screened under the  
12 program.

13 “(3) Recommendations for improving care and  
14 services to veterans exhibiting symptoms of trau-  
15 matic brain injury.

16 **“§ 1792. Comprehensive program for long-term trau-**  
17 **matic brain injury rehabilitation**

18 “(a) COMPREHENSIVE PROGRAM.—The Secretary  
19 shall develop and carry out a comprehensive program of  
20 long-term care for post-acute traumatic brain injury reha-  
21 bilitation that includes residential, community, and home-  
22 based components utilizing interdisciplinary treatment  
23 teams.

24 “(b) LOCATION OF PROGRAM.—The Secretary shall  
25 carry out the program developed under subsection (a) in

1 four geographically dispersed polytrauma network sites  
2 designated by the Secretary.

3 “(c) ELIGIBILITY.—A veteran is eligible for care  
4 under the program developed under subsection (a) if the  
5 veteran is otherwise eligible for care under this chapter  
6 and—

7 “(1) served on active duty in a theater of com-  
8 bat operations (as determined by the Secretary in  
9 consultation with the Secretary of Defense) during a  
10 period of war after the Persian Gulf War, or in com-  
11 bat against a hostile force during a period of hos-  
12 tilities (as defined in section 1712A(a)(2)(B) of this  
13 title) after November 11, 1998;

14 “(2) is diagnosed as suffering from moderate to  
15 severe traumatic brain injury; and

16 “(3) is unable to manage routine activities of  
17 daily living without supervision or assistance.

18 “(d) REPORT.—Not later than one year after the  
19 date of the enactment of this section, and annually there-  
20 after, the Secretary shall submit to the Committees on  
21 Veterans’ Affairs of the Senate and the House of Rep-  
22 resentatives a report containing the following information:

23 “(1) A description of the operation of the pro-  
24 gram.

1           “(2) The number of veterans provided care  
2           under the program during the year preceding such  
3           report.

4           “(3) The annual cost of operating the program.

5   **“§ 1793. Traumatic brain injury transition offices**

6           “(a) ESTABLISHMENT.—The Secretary shall estab-  
7           lish a traumatic brain injury transition office at each De-  
8           partment polytrauma network site for the purposes of co-  
9           ordinating the provision of health-care and services to vet-  
10          erans who suffer from moderate to severe traumatic brain  
11          injuries and are in need of health-care and services not  
12          immediately offered by the Department.

13          “(b) COOPERATIVE AGREEMENTS.—The Secretary,  
14          through each such office established under subsection (a),  
15          shall have the authority to arrange for the provision of  
16          health-care and services through cooperative agreements  
17          with appropriate public or private entities that have estab-  
18          lished long-term neurobehavioral rehabilitation and recov-  
19          ery programs.

20   **“§ 1794. Traumatic brain injury registry**

21          “(a) IN GENERAL.—The Secretary shall establish  
22          and maintain a registry to be known as the ‘Traumatic  
23          Brain Injury Veterans’ Health Registry’ (in this section  
24          referred to as the ‘Registry’).

1       “(b) DESCRIPTION.—The Registry shall include the  
2 following information:

3               “(1) A list containing the name of each indi-  
4 vidual who served as a member of the Armed Forces  
5 in Operation Enduring Freedom or Operation Iraqi  
6 Freedom who exhibits symptoms associated with  
7 traumatic brain injury and who—

8               “(A) applies for care and services from the  
9 Department under this chapter; or

10              “(B) files a claim for compensation under  
11 chapter 11 of this title on the basis of any dis-  
12 ability which may be associated with such serv-  
13 ice; and

14              “(2) any relevant medical data relating to the  
15 health status of an individual described in paragraph  
16 (1) and any other information the Secretary con-  
17 siders relevant and appropriate with respect to such  
18 an individual if the individual—

19              “(A) grants permission to the Secretary to  
20 include such information in the Registry; or

21              “(B) is deceased at the time such indi-  
22 vidual is listed in the Registry.

23       “(c) NOTIFICATION.—The Secretary shall notify indi-  
24 viduals listed in the Registry of significant developments  
25 in research on the health consequences of military service

1 in the Operation Enduring Freedom and Operation Iraqi  
2 Freedom theaters of operations.

3 **“§ 1795. Centers for traumatic brain injury research,**  
4 **education, and clinical activities**

5 “(a) PURPOSE.—The purpose of this section is to  
6 provide for the improvement of the provision of health care  
7 to eligible veterans with traumatic brain injuries  
8 through—

9 “(1) the conduct of research (including research  
10 on improving facilities of the Department concen-  
11 trating on traumatic brain injury care and on im-  
12 proving the delivery of traumatic brain injury care  
13 by the Department);

14 “(2) the education and training of health care  
15 personnel of the Department; and

16 “(3) the development of improved models and  
17 systems for the furnishing of traumatic brain injury  
18 care by the Department.

19 “(b) ESTABLISHMENT OF CENTERS.—(1) The Sec-  
20 retary shall establish and operate centers for traumatic  
21 brain injury research, education, and clinical activities.  
22 Such centers shall be established and operated by collabo-  
23 rating Department facilities as provided in subsection  
24 (c)(1). Each such center shall function as a center for—

25 “(A) research on traumatic brain injury;

1           “(B) the use by the Department of specific  
2           models for furnishing traumatic brain injury care;

3           “(C) education and training of health-care pro-  
4           fessionals of the Department; and

5           “(D) the development and implementation of  
6           innovative clinical activities and systems of care with  
7           respect to the delivery of traumatic brain injury care  
8           by the Department.

9           “(2) The Secretary shall, upon the recommendation  
10          of the Under Secretary for Health, designate the centers  
11          under this section. In making such designations, the Sec-  
12          retary shall ensure that the centers designated are located  
13          in various geographic regions of the United States. The  
14          Secretary may designate a center under this section only  
15          if—

16               “(A) the proposal submitted for the designation  
17               of the center meets the requirements of subsection  
18               (c);

19               “(B) the Secretary makes the finding described  
20               in subsection (d); and

21               “(C) the peer review panel established under  
22               subsection (e) makes the determination specified in  
23               subsection (e)(3) with respect to that proposal.

24           “(3) Not more than five centers may be designated  
25          under this section.



1       “(4) The authority of the Secretary to establish and  
2       operate centers under this section is subject to the appro-  
3       priation of funds for that purpose.

4       “(c) PROPOSALS FOR DESIGNATION OF CENTERS.—  
5       A proposal submitted for the designation of a center under  
6       this section shall—

7               “(1) provide for close collaboration in the estab-  
8       lishment and operation of the center, and for the  
9       provision of care and the conduct of research and  
10      education at the center, by a Department facility or  
11      facilities in the same geographic area which have a  
12      mission centered on traumatic brain injury care and  
13      a Department facility in that area which has a mis-  
14      sion of providing tertiary medical care;

15              “(2) provide that no less than 50 percent of the  
16      funds appropriated for the center for support of clin-  
17      ical care, research, and education will be provided to  
18      the collaborating facility or facilities that have a  
19      mission centered on traumatic brain injury care; and

20              “(3) provide for a governance arrangement be-  
21      tween the collaborating Department facilities which  
22      ensures that the center will be established and oper-  
23      ated in a manner aimed at improving the quality of  
24      traumatic brain injury care at the collaborating fa-

1 cility or facilities which have a mission centered on  
2 traumatic brain injury care.

3 “(d) FINDING OF SECRETARY.—The finding referred  
4 to in subsection (b)(2)(B) with respect to a proposal for  
5 designation of a site as a location of a center under this  
6 section is a finding by the Secretary, upon the rec-  
7 ommendation of the Under Secretary for Health, that the  
8 facilities submitting the proposal have developed (or may  
9 reasonably be anticipated to develop) each of the following:

10 “(1) An arrangement with an accredited med-  
11 ical school that provides education and training in  
12 traumatic brain injury care and with which one or  
13 more of the participating Department facilities is af-  
14 filiated under which medical residents receive edu-  
15 cation and training in traumatic brain injury care  
16 through regular rotation through the participating  
17 Department facilities so as to provide such residents  
18 with training in the diagnosis and treatment of trau-  
19 matic brain injury.

20 “(2) An arrangement under which nursing, so-  
21 cial work, counseling, or allied health personnel re-  
22 ceive training and education in traumatic brain in-  
23 jury care through regular rotation through the par-  
24 ticipating Department facilities.

1           “(3) The ability to attract scientists who have  
2       demonstrated achievement in research—

3           “(A) into the evaluation of innovative ap-  
4       proaches to the design of traumatic brain injury  
5       care; or

6           “(B) into the causes, prevention, and  
7       treatment of traumatic brain injury.

8           “(4) The capability to evaluate effectively the  
9       activities of the center, including activities relating  
10      to the evaluation of specific efforts to improve the  
11      quality and effectiveness of traumatic brain injury  
12      care provided by the Department at or through indi-  
13      vidual facilities.

14          “(e) PEER REVIEW PANEL.—(1) In order to provide  
15      advice to assist the Secretary and the Under Secretary for  
16      Health to carry out their responsibilities under this sec-  
17      tion, the official within the central office of the Veterans  
18      Health Administration responsible for traumatic brain in-  
19      jury care shall establish a peer review panel to assess the  
20      scientific and clinical merit of proposals that are sub-  
21      mitted to the Secretary for the designation of centers  
22      under this section.

23          “(2) The panel shall consist of experts in the fields  
24      of traumatic brain injury research, education and training,

1 and clinical care. Members of the panel shall serve as con-  
2 sultants to the Department.

3 “(3) The panel shall review each proposal submitted  
4 to the panel by the official referred to in paragraph (1)  
5 and shall submit to that official its views on the relative  
6 scientific and clinical merit of each such proposal. The  
7 panel shall specifically determine with respect to each such  
8 proposal whether that proposal is among those proposals  
9 which have met the highest competitive standards of sci-  
10 entific and clinical merit.

11 “(4) The panel shall not be subject to the Federal  
12 Advisory Committee Act (5 U.S.C. App.).

13 “(f) AWARD OF FUNDING.—Clinical and scientific in-  
14 vestigation activities at each center established under this  
15 section—

16 “(1) may compete for the award of funding  
17 from amounts appropriated for the Department of  
18 Veterans Affairs medical and prosthetics research  
19 account; and

20 “(2) shall receive priority in the award of fund-  
21 ing from such account insofar as funds are awarded  
22 to projects and activities relating to traumatic brain  
23 injury.

24 “(g) DISSEMINATION OF USEFUL INFORMATION.—  
25 The Under Secretary for Health shall ensure that infor-

1 mation produced by the research, education and training,  
2 and clinical activities of centers established under this sec-  
3 tion that may be useful for other activities of the Veterans  
4 Health Administration is disseminated throughout the  
5 Veterans Health Administration. Such dissemination shall  
6 be made through publications, through programs of con-  
7 tinuing medical and related education provided through  
8 regional medical education centers under subchapter VI  
9 of chapter 74 of this title, and through other means. Such  
10 programs of continuing medical education shall receive  
11 priority in the award of funding.

12 “(h) SUPERVISION OF CENTERS.—The official within  
13 the central office of the Veterans Health Administration  
14 responsible for traumatic brain injury care shall be re-  
15 sponsible for supervising the operation of the centers es-  
16 tablished pursuant to this section and shall provide for  
17 ongoing evaluation of the centers and their compliance  
18 with the requirements of this section.

19 “(i) AUTHORIZATION OF APPROPRIATIONS.—(1)  
20 There are authorized to be appropriated to the Depart-  
21 ment of Veterans Affairs for the basic support of the re-  
22 search and education and training activities of centers es-  
23 tablished pursuant to this section such sums as may be  
24 necessary.

1       “(2) In addition to funds appropriated for a fiscal  
2 year pursuant to the authorization of appropriations in  
3 paragraph (1), the Under Secretary for Health shall allo-  
4 cate to such centers from other funds appropriated for  
5 that fiscal year generally for the Department of Veterans  
6 Affairs medical services account and the Department of  
7 Veterans Affairs medical and prosthetics research account  
8 such amounts as the Under Secretary for Health deter-  
9 mines appropriate to carry out the purposes of this sec-  
10 tion.

11       “(j) ANNUAL REPORTS.—Not later than February 1  
12 of each of year, the Secretary of Veterans Affairs shall  
13 submit to the Committees on Veterans’ Affairs of the Sen-  
14 ate and House of Representatives a report on the status  
15 and activities of the centers for traumatic brain injury re-  
16 search, education, and clinical activities during the pre-  
17 ceding fiscal year. Each such report shall include the fol-  
18 lowing:

19               “(1) A description of the activities carried out  
20 at each center and the funding provided by the De-  
21 partment for such activities.

22               “(2) A description of the advances made at  
23 each of the participating facilities of the center in  
24 research, education and training, and clinical activi-

1       ties relating to traumatic brain injury care and  
2       treatment.

3               “(3) A description of the actions taken by the  
4       Under Secretary for Health pursuant to subsection  
5       (g) to disseminate information derived from such ac-  
6       tivities throughout the Veterans Health Administra-  
7       tion.

8               “(4) The evaluation of the Secretary as to the  
9       effectiveness of the centers in fulfilling the purposes  
10      of this section.

11      “(k) AUTHORIZATION OF APPROPRIATIONS.—(1)  
12      There are authorized to be appropriated to the Depart-  
13      ment of Veterans Affairs for the basic support of the re-  
14      search and education and training activities of centers es-  
15      tablished pursuant to this section amounts as follows:

16              “(A) \$10,000,000 for fiscal year 2008.

17              “(B) \$20,000,000 for each of fiscal years 2009  
18      through 2011.

19      “(2) In addition to funds appropriated for a fiscal  
20      year pursuant to the authorization of appropriations in  
21      paragraph (1), the Under Secretary for Health shall allo-  
22      cate to such centers from other funds appropriated for  
23      that fiscal year generally for the Department of Veterans  
24      Affairs medical services account and the Department of  
25      Veterans Affairs medical and prosthetics research account

1 such amounts as the Under Secretary for Health deter-  
2 mines appropriate to carry out the purposes of this sec-  
3 tion.

4 **“§ 1796. Committee on Care of Veterans with Trau-**  
5 **matic Brain Injury**

6 “(a) ESTABLISHMENT.—The Secretary shall estab-  
7 lish in the Veterans Health Administration a committee  
8 to be known as the ‘Committee on Care of Veterans with  
9 Traumatic Brain Injury’. The Under Secretary for Health  
10 shall appoint employees of the Department with expertise  
11 in the care of veterans with traumatic brain injury to serve  
12 on the committee.

13 “(b) RESPONSIBILITIES OF COMMITTEE.—The com-  
14 mittee shall assess, and carry out a continuing assessment  
15 of, the capability of the Veterans Health Administration  
16 to meet effectively the treatment and rehabilitation needs  
17 of veterans with traumatic brain injury. In carrying out  
18 that responsibility, the committee shall—

19 “(1) evaluate the care provided to such veterans  
20 through the Veterans Health Administration;

21 “(2) identify systemwide problems in caring for  
22 such veterans in facilities of the Veterans Health  
23 Administration;

24 “(3) identify specific facilities within the Vet-  
25 erans Health Administration at which program en-



1       richment is needed to improve treatment and reha-  
2       bilitation of such veterans; and

3               “(4) identify model programs which the com-  
4       mittee considers to have been successful in the treat-  
5       ment and rehabilitation of such veterans and which  
6       should be implemented more widely in or through fa-  
7       cilities of the Veterans Health Administration.

8       “(c) ADVICE AND RECOMMENDATIONS.—The com-  
9       mittee shall—

10              “(1) advise the Under Secretary regarding the  
11       development of policies for the care and rehabilita-  
12       tion of veterans with traumatic brain injury; and

13              “(2) make recommendations to the Under Sec-  
14       retary—

15                      “(A) for improving programs of care of  
16       such veterans at specific facilities and through-  
17       out the Veterans Health Administration;

18                      “(B) for establishing special programs of  
19       education and training relevant to the care of  
20       such veterans for employees of the Veterans  
21       Health Administration;

22                      “(C) regarding research needs and prior-  
23       ities relevant to the care of such veterans; and

24                      “(D) regarding the appropriate allocation  
25       of resources for all such activities.

1       “(d) ANNUAL REPORT.—Not later than June 1 of  
2 2008, and each subsequent year, the Secretary shall sub-  
3 mit to the Committees on Veterans’ Affairs of the Senate  
4 and House of Representatives a report on the implementa-  
5 tion of this section. Each such report shall include the fol-  
6 lowing for the calendar year preceding the year in which  
7 the report is submitted:

8               “(1) A list of the members of the committee.

9               “(2) The assessment of the Under Secretary for  
10 Health, after review of the initial findings of the  
11 committee, regarding the capability of the Veterans  
12 Health Administration, on a systemwide and facility-  
13 by-facility basis, to meet effectively the treatment  
14 and rehabilitation needs of veterans with traumatic  
15 brain injury.

16              “(3) The plans of the committee for further as-  
17 sessments.

18              “(4) The findings and recommendations made  
19 by the committee to the Under Secretary for Health  
20 and the views of the Under Secretary on such find-  
21 ings and recommendations.

22              “(5) A description of the steps taken, plans  
23 made (and a timetable for the execution of such  
24 plans), and resources to be applied toward improving  
25 the capability of the Veterans Health Administration

1 to meet effectively the treatment and rehabilitation  
 2 needs of veterans with traumatic brain injury.”.

3 (2) CLERICAL AMENDMENT.—The table of con-  
 4 tents at the beginning of such chapter is amended  
 5 by adding at the end the following new items:

“SUBCHAPTER IX—TRAUMATIC BRAIN INJURY

“1791. Screening for traumatic brain injuries.

“1792. Comprehensive program for long-term traumatic brain injury rehabilita-  
 tion.

“1793. Traumatic brain injury transition offices.

“1794. Traumatic brain injury registry.

“1795. Centers for traumatic brain injury research, education, and clinical ac-  
 tivities.

“1796. Committee on Care of Veterans with Traumatic Brain Injury.”.

6 (b) EFFECTIVE DATE.—The Secretary shall imple-  
 7 ment the requirements of subchapter IX of title 38,  
 8 United States Code, as added by subsection (a), not later  
 9 than 180 days after the date of the enactment of this Act.

10 **SEC. 3. PILOT PROGRAM FOR DELIVERY OF READJUST-**  
 11 **MENT COUNSELING AND MENTAL HEALTH**  
 12 **SERVICES CERTAIN SERVICES TO VETERANS**  
 13 **THROUGH MOBILE VET CENTERS.**

14 (a) PILOT PROGRAM.—Chapter 17 of title 38, United  
 15 States Code, is amended by inserting after section 1712B  
 16 the following new section:

1   **“§ 1712C. Pilot program for delivery of readjustment**  
 2                   **counseling and mental health services**  
 3                   **through mobile Vet Centers *Pilot pro-***  
 4                   ***gram for delivery of certain services***  
 5                   ***through mobile vet centers***

6           “(a) PILOT PROGRAM.—To improve access to mental  
 7 health services in rural areas, the Secretary shall carry  
 8 out a pilot program under which the Secretary shall pro-  
 9 vide ~~readjustment counseling and related mental health~~  
 10 ~~services~~ *readjustment counseling, related mental health*  
 11 *services, benefits outreach, and, to the extent practicable, as-*  
 12 *sistance with claims for benefits under this title* through  
 13 the use of mobile centers (as that term is defined in sec-  
 14 tion 1712A(i)(1)), to be known as ‘mobile Vet Centers’.  
 15 In carrying out the pilot program, the Secretary shall de-  
 16 termine the most effective manner in which to operate the  
 17 mobile Vet Centers.

18           “(b) SCOPE AND LOCATION.—(1) The Secretary shall  
 19 establish two mobile Vet Centers in each of the following  
 20 five Veterans Integrated Service Networks:

21                   “(A) Veterans Integrated Service Network

22                   1.

23                   “(B) Veterans Integrated Service Network

24                   16.

25                   “(C) Veterans Integrated Service Network

26                   19.

1 “(D) Veterans Integrated Service Network

2 20.

3 “(E) Veterans Integrated Service Network

4 23.

5 “(2) Within each Veterans Integrated Service Net-  
6 work under paragraph (1), the Secretary shall determine  
7 the area to be serviced by each mobile Vet Center. In mak-  
8 ing that determination, the Secretary shall give priority  
9 to areas in which limited mental health *and outreach* serv-  
10 ices are available.

11 “(3) If the Secretary determines that mobile Vet Cen-  
12 ters in addition to such centers required under paragraph  
13 (1) are warranted, the Secretary may establish additional  
14 mobile Vet Centers and may establish such centers in Vet-  
15 erans Integrated Service Networks other than the Vet-  
16 erans Integrated Service Networks referred to in that  
17 paragraph. Upon such a determination by the Secretary,  
18 the Secretary shall notify the Committees on Veterans’ Af-  
19 fairs of the Senate and House of Representatives of such  
20 determination.

21 “(c) TERMINATION.—The authority to carry out a  
22 pilot program under this section shall terminate on the  
23 date that is three years after the date of the enactment  
24 of this section.

1       “(d) REPORT.—Not later than 90 days after the date  
 2 on which the pilot program terminates under subsection  
 3 (a), the Secretary shall submit to the Committees on Vet-  
 4 erans’ Affairs of the Senate and House of Representatives  
 5 a report on the pilot program. Such report shall describe  
 6 how the Secretary established and carried out the pilot  
 7 program and include an evaluation of the Secretary of the  
 8 benefits and disadvantages of providing ~~readjustment~~  
 9 ~~counseling and related mental health services~~ *readjustment*  
 10 *counseling, related mental health services, benefits outreach,*  
 11 *and claims assistance* through the use of mobile Vets Cen-  
 12 ters.

13       “(e) AUTHORIZATION OF APPROPRIATIONS.—There  
 14 is authorized to be appropriated to carry out this section  
 15 \$7,500,000 for fiscal year 2008 and each subsequent fiscal  
 16 year.”.

17       (b) CLERICAL AMENDMENT.—The table of sections  
 18 at the beginning of such chapter is amended by inserting  
 19 after the item related to section 1712B the following new  
 20 item:

“~~1712C. Pilot program for delivery of readjustment counseling and mental health services through mobile Vet Centers.~~ 1712C. Pilot program for delivery of certain services through mobile Vet Centers.”.

1 **SEC. 4. ADVISORY COMMITTEE ON RURAL VETERANS.**

2 (a) ESTABLISHMENT OF COMMITTEE.—Subchapter  
3 III of chapter 5 of title 38, United States Code, is amend-  
4 ed by adding at the end the following new section:

5 **“§ 546. Advisory Committee on Rural Veterans**

6 “(a) ESTABLISHMENT.—(1) The Secretary shall es-  
7 tablish an advisory committee to be known as the ‘Advi-  
8 sory Committee on Rural Veterans’ (hereinafter in this  
9 section referred to as ‘the Committee’).

10 “(2)(A) The Committee shall consist of members ap-  
11 pointed by the Secretary from the general public, includ-  
12 ing—

13 “(i) representatives of rural veterans;

14 “(ii) individuals who are recognized authorities  
15 in fields pertinent to the needs of rural veterans, in-  
16 cluding specific or unique health-care needs of rural  
17 veterans and access issues of rural veterans;

18 “(iii) individuals who have expertise in the de-  
19 livery of mental health care in rural areas;

20 “(iv) individuals who have expertise in the deliv-  
21 ery of long-term care in rural areas;

22 “(v) at least one veterans service organization  
23 representative from a rural State; and

24 “(vi) representatives of rural veterans with  
25 service-connected disabilities.

1       “(B) The Committee shall include, as ex officio mem-  
2   bers—

3               “(i) the Secretary of Health and Human Serv-  
4       ices (or a representative of the Secretary of Health  
5       and Human Services designated by that Secretary);

6               “(ii) the Director of the Indian Health Service  
7       (or a representative of that Director); and

8               “(iii) the Under Secretary for Health and the  
9       Under Secretary for Benefits, or their designees.

10       “(C) The Secretary may invite representatives of  
11   other departments and agencies of the United States to  
12   participate in the meetings and other activities of the  
13   Committee.

14       “(3) The Secretary shall determine the number,  
15   terms of service, and pay and allowances of members of  
16   the Committee appointed by the Secretary, except that a  
17   term of service of any such member may not exceed three  
18   years. The Secretary may reappoint any such member for  
19   additional terms of service.

20       “(b) RESPONSIBILITIES OF COMMITTEE.—The Sec-  
21   retary shall, on a regular basis, consult with and seek the  
22   advice of the Committee with respect to the administration  
23   of benefits by the Department for rural veterans, reports  
24   and studies pertaining to rural veterans, and the needs



1 of rural veterans with respect to primary care, mental  
2 health care, and long-term care needs of rural veterans.

3 “(c) REPORT.—(1) Not later than September 1 of  
4 each odd-numbered year until 2013, the Committee shall  
5 submit to the Secretary a report on the programs and ac-  
6 tivities of the Department that pertain to rural veterans.  
7 Each such report shall include—

8 “(A) an assessment of the needs of rural vet-  
9 erans with respect to primary care, mental health  
10 care, and long-term care needs of rural veterans and  
11 other benefits and programs administered by the  
12 Department;

13 “(B) a review of the programs and activities of  
14 the Department designed to meet such needs; and

15 “(C) such recommendations (including rec-  
16 ommendations for administrative and legislative ac-  
17 tion) as the Committee considers appropriate.

18 “(2) The Secretary shall, within 60 days after receiv-  
19 ing each report under paragraph (1), submit to Congress  
20 a copy of the report, together with any comments con-  
21 cerning the report that the Secretary considers appro-  
22 priate.

23 “(3) The Committee may also submit to the Sec-  
24 retary such other reports and recommendations as the  
25 Committee considers appropriate.

1       “(4) The Secretary shall submit with each annual re-  
2 port submitted to Congress pursuant to section 529 of this  
3 title a summary of all reports and recommendations of the  
4 Committee submitted to the Secretary since the previous  
5 annual report of the Secretary submitted pursuant to that  
6 section.”.

7       (b) CLERICAL AMENDMENT.—The table of sections  
8 at the beginning of such chapter is amended by adding  
9 at the end the following new item:

“546. Advisory Committee on Rural Veterans.”.



Union Calendar No. 100

110TH CONGRESS  
1ST Session

H. R. 2199

[Report No. 110-166]

A BILL

To amend title 38, United States Code, to direct the Secretary of Veterans Affairs to provide certain improvements in the treatment of individuals with traumatic brain injuries, and for other purposes.

MAY 23, 2007

Reported with amendments, committed to the Committee of the Whole House on the State of the Union, and ordered to be printed